

Notifiable Infectious Diseases Reports

Reported Cases and Deaths of National Notifiable Infectious Diseases — China, March 2022

Diseases	Cases	Deaths
Plague	0	0
Cholera	1	0
SARS-CoV	0	0
Acquired immune deficiency syndrome*	5,020	1,655
Hepatitis	140,574	47
Hepatitis A	1,050	0
Hepatitis B	114,003	38
Hepatitis C	21,722	9
Hepatitis D	23	0
Hepatitis E	3,131	0
Other hepatitis	645	0
Poliomyelitis	0	0
Human infection with H5N1 virus	0	0
Measles	71	0
Epidemic hemorrhagic fever	344	2
Rabies	8	6
Japanese encephalitis	2	0
Dengue	2	0
Anthrax	15	0
Dysentery	2,836	0
Tuberculosis	73,110	312
Typhoid fever and paratyphoid fever	408	0
Meningococcal meningitis	10	2
Pertussis	3,747	1
Diphtheria	0	0
Neonatal tetanus	1	0
Scarlet fever	1,848	0
Brucellosis	6,656	1
Gonorrhea	8,886	0
Syphilis	46,978	6
Leptospirosis	5	0
Schistosomiasis	5	0
Malaria	31	0
Human infection with H7N9 virus	0	0
COVID-19†	41,577	2
Influenza	133,184	1
Mumps	10,001	0

Continued

Diseases	Cases	Deaths
Rubella	98	1
Acute hemorrhagic conjunctivitis	2,559	0
Leprosy	35	0
Typhus	36	0
Kala azar	30	0
Echinococcosis	338	0
Filariasis	0	0
Infectious diarrhea [§]	122,555	0
Hand, foot and mouth disease	33,287	0
Total	634,258	2,036

* The number of deaths of acquired immune deficiency syndrome (AIDS) is the number of all-cause deaths reported in the month by cumulative reported AIDS patients.

† The data were from the website of the National Health Commission of the People's Republic of China.

§ Infectious diarrhea excludes cholera, dysentery, typhoid fever and paratyphoid fever.

The number of cases and cause-specific deaths refer to data recorded in National Notifiable Disease Reporting System in China, which includes both clinically-diagnosed cases and laboratory-confirmed cases. Only reported cases of the 31 provincial-level administrative divisions in the mainland of China are included in the table, whereas data of Hong Kong Special Administrative Region, Macau Special Administrative Region, and Taiwan are not included. Monthly statistics are calculated without annual verification, which were usually conducted in February of the next year for de-duplication and verification of reported cases in annual statistics. Therefore, 12-month cases could not be added together directly to calculate the cumulative cases because the individual information might be verified via National Notifiable Disease Reporting System according to information verification or field investigations by local CDCs.

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